ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | Rn. | | 10-19-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | E.H | 715 | 11-16-0 |

## INDEX OF CLAIMS

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| ✔ | Rejected | N | | Non-elected |
| = | Allowed | I | | Interference |
| – | (Through numeral)... Canceled | A | | Appeal |
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If more than 150 claims or 10 actions
staple additional sheet here

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